500.013131

PATENT APPLICATION

IN THE UNITED STATES PA	TENT A	AND TRADEMARK OFFICE	#7/0
In re Application of:)		KO
K 64:	:	Examiner: T. Carter	ΚΟ 3-1 3 θ]
TAKEYUKI NAGASHIMA)		, , ,
	:	Group Art Unit: 2622 REC	FIVED
Application No.: 09/197,475		B & B.	Julian II The Land
	:	lAN	₹ 1 3 2003
Filed: November 23, 1998		7	010000
	:	vecnnoic	ogy Center 2600
For: PRINTER SERVER,)		
METHOD FOR PROCESSING	:		
DATA, AND STORAGE)		
MEDITIM		March 4 2003	

Commissioner for Patents Washington, D.C. 20231

<u>AMENDMENT</u>

Sir:

In response to the Office Action dated December 4, 2002, please amend the above-identified application, as follows:

This Amendment is submitted under the guidelines of the revised format announced in the attached notice.

> I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on



Docket No. 03500.013131

TAKEYUKI NAGASHIMA

Application No.: 09/197,475

Filed: November 23, 1998

For: PRINTER SERVER, METHOD FOR PROCESSING

DATA, AND STORAGE MEDIUM

Examiner: T. Carter

RECEIVED

Group Art Unit: 2622

MAR 1 3 2003

Technology Center 2600

Date: March 4, 2003

COMMISSIONER FOR PATENTS

Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Petents, Washington, D.C. 20231 on

(Date of Deposit) Signature

		CL	AIMS AS AMEN	DED		
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 12	MINUS	** 20	-0-	x \$9 \$18	-0-
INDEP. CLAIMS	* 3	MINUS	***	= -0-	x \$42 \$84	-0-
Fee for Multiple Dependent claims \$140°/\$280						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					-0-	

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

°Verified Statement claiming small entity status is enclosed, if not filed previously.		
A check in the amount of \$	is enclosed.	

	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	Attorney for Applicant
	Registration No. 39,000
30 Ro New	PATRICK, CELLA, HARPER & SCINTO ockefeller Plaza York, New York 10112-3801 imile: (212) 218-2200

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